From: Carlson, Gregory

Sent:Thu, 20 Aug 2015 15:03:51 -0400To:Jenson, Jill;Rinovato, CherylCc:Millward, Joseph;Krasnow, Debbie

**Subject:** FW: Thrifty White Notes **Attachments:** Thrifty White visit notes 8.docx

## Jill/Cheryl,

See the Guardrails by Emdeon below. Sounds like if this happens in the background could help ease some of the issue Dave is having around OARRS and the call center.

Also copying Deb to see if we could get similar capabilities.

From: Millward, Joseph

Sent: Thursday, August 20, 2015 2:53 PM

To: McClune, Robert; Raub, Philip; Durr, Walt; Hart, Christy

Cc: Hart, Erin; Zakin, Adam; Shaheen, Richard; Boyd, Jessica; Carlson, Gregory; Chunderlik, George

Subject: Thrifty White Notes

Here are my notes.

Thrifty White visit notes 8/19/15.

- 1. Keep engaged with the DEA through all steps of the process.
- 2. It is critical to have a robust Suspicious Order Monitoring program. "Relying on thresholds is not good enough for the DEA." How would you identify a store that has an unusually large order that does not push it over the threshold? They have a process to review the orders before they are filled by the DC.
- 3. Thrifty White has instituted "Guardrails" for dispensing controlled substances by the pharmacies.
  - a. Through Emdeon, they have created a series of edits for controlled substance prescriptions that will trigger a risk assessment flag for the pharmacists.
  - b. The risk assessment contains red and green flags to help the pharmacist's professional judgment in determining if the prescription is for a legitimate medical use written by a prescriber in the normal course of their practice.
    - i. Examples of flags include
    - 1. Form of payment cash vs. medical insurance
      - a. They do not have a way to separate the use of discount cards from medical insurance plans in the edit screening process
    - 2. Geographical relationship of the prescriber and patient to the pharmacy
      - a. Done through Emdeon edits.
    - 3. Combination of controls being dispensed
  - c. The pharmacist scans the risk assessments into the patient's file.
  - d. If necessary, they created controlled substance agreements that prescribers and patients must sign.
  - e. The risk assessment forms also serve as documentation for denials to fill.
- 4. Mike at Custom Vault should be able to provide us a packet for the DEA.
- 5. The controlled drug areas, including the receiving area, must have specific policies and procedures for every step. Accountability tracking is assumed at every step.
  - a. Receiving
  - b. Stocking

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- c. Order fulfillment
- d. Auditing totes
- e. Packing and sealing totes
- f. Transportation
- g. Inventory management
  - i. Auditing
  - ii. Tracking
  - iii. Quarantining and returning outdates and damages
  - 1. Separate locking spaces for CII and CIII-V.
- h. Training
  - i. Initial and regular (monthly, quarterly, etc.)
- 6. The facility should maintain on file a complete specification sheet for all components of the security system.
  - a. Hardline alarm communication
  - b. Backup systems and power
  - c. Distance and response time of local law enforcement
  - d. Specific models and capabilities of every camera, sensor, physical access system, and alarm
- 7. Have adequate ventilation accounting for when the steel doors are sealed.
- When using secondary wholesaler, they share dispensing data at the GCN and description levels every 3 months.
- 9. Pamela suggested finding the building requirements within the Prescription Drug Marketing Act (PDMA).

From: McClune, Robert

Sent: Thursday, August 20, 2015 10:09 AM

**To:** Raub, Philip; Millward, Joseph; Durr, Walt; Hart, Christy **Cc:** Hart, Erin; Zakin, Adam; Shaheen, Richard; Boyd, Jessica

Subject: Thrifty White Notes

Team -

I wanted to send a note out regarding our trip to Thrifty White yesterday in conjunction with the planned warehouse move, vault and refrigeration. I just spoke with Rick Shaheen regarding security at the facility and wanted to get these notes in the works so Rick can work on his design.

Please chime in to this email string with your Thrifty White notes. Do not worry about duplication, just brain dump.

# **Attachments**

- New Warehouse Design (page #2 with refrigeration)
- For the guidelines Pam recommended the attached PDMA from 1987

# **Internal Team Questions:**

- Phil, can you provide a digital copy of the vault configuration Pam provided?
- Phil, can you set up a call-line for a debrief Wednesday Friday next week?

- Erin, do you have a list of C2 medications you would look to warehouse in ranked order once this is final. Walt needs this to prepare for racking space.
  - If not, I can craft on, just figured I would ask.
- Jess, considering we only use CSOS for 3-5s today, what changes would be needed from your point of view to allow for us to turn on the C2s.

# **Thrifty White Notes (in random order):**

- Overall they seemed very loose on loss prevention and security (in my opinion).
- Currently they are running about 60 SKUs through the vault, however they have peaked at 150.
- Typical inventory levels run at 2-4 weeks on hand in the vault
- Due to volume restrictions toward the end of the year they run the on hands to about 12 weeks to protect service levels to the stores
- They do daily cycle counts on all of the controls and run paper dividers between lot numbers.
- Only one case is opened at a time in order to improve counts.
- There was a comment about placing hot-spots on the skylights to prevent mission impossible style theft.
- Considering the skylights there was also a recommendation to place a roof on the cage.
- Since we are breaking ground on this, it was recommended to get the DEA out to the site to review our plan and to prevent any potential miss-steps in construction
- Mike at Custom Vault is a solid resource to work with for security design based on Pam's recommendation.
- Their quarantine space was literally a cabinet with a sign on on it that said quarantine.
- They use a "potato chip" gun to tag incoming stock with PO, Expiry date and lot number?
- It seemed they run a month and day tagging system on call incoming cases (big dots).
- The warehouse does not take store returns. They go straight from the store to Inmar, which I think is our current policy.
- They use UPS as their delivery service
- 50% of their business is Long Term Care, and 95% of their business is pharmacy
- They run PDC scores at or greater than 90% [I am going to reach out to Justin on this one]
- In regard to refrigeration they do not currently run refrigeration, however Pam mentioned she ran
  that for Super Valu. She was I think, impressed by our current plan and mentioned keeping items that
  would be sensitive to condensation away from the door. She ran 200-250 SKUs out of the warehouse
  previousl.
- She also mentioned the Ice Packing and In Tote cooler insulation with the mention of a company called Polar Tech
- They run about 50% of their eligible patients through MedSync with ATEB.

If I think of something else I will add it to this email string. Please add your notes.

#### **Thanks**

Bob McClune

Sr. Category Manager, Pharmacy Giant Eagle, Inc. phone: (412)968-5146 email: robert.mcclune@gianteagle.com

### Linked

Case: 1:17-md-02804-DAP Doc #: 4074-8 Filed: 10/25/21 4 of 6. PageID #: 547176

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